

1.) CORPORATION NAME:

DUE DATE: **12/31/2011**

Sperian Protection Optical, Inc.

SCC ID NO: **F0275422**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: **B.E.**

AUTH IN VI

CORPORATION SERVICE COMPANY

Bank of America Center, 16th Floor

1111 East Main Street

RICHMOND, VA 23219

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	1,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

RICHMOND CITY

4.) STATE OR COUNTRY OF INCORPORATION:

DE

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 10 THURBER BLVD

CITY/ST/ZIP: SMITHFIELD, RI 02917-

7.) DIRECTORS AND PRINCIPAL OFFICERS:

All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

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OFFICER

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DIRECTOR

NAME: MARK LEVY
TITLE: PRESIDENT
ADDRESS: 101 COLUMBIA ROAD AB-2
CITY/ST/ZIP/CO: MORRISTOWN, NJ 07962-

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OFFICER

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DIRECTOR

NAME: DAVID DEMEO
TITLE: VICE PRESIDENT
ADDRESS: 101 COLUMBIA ROAD
AB-2
CITY/ST/ZIP/CO: MORRISTOWN, NJ 07962-

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OFFICER

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DIRECTOR

NAME: MANISH SHANBHAG
TITLE: ASST SECRETARY
ADDRESS: ONE FIRELITE PL.
CITY/ST/ZIP/CO: NORTHFORD, CT 06472-

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OFFICER

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DIRECTOR

NAME: JAMES M. DESTEFANO
TITLE: VICE PRES - TAX
ADDRESS: 101 COLUMBIA ROAD
CITY/ST/ZIP/CO: MORRISTOWN, NJ 07962-

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OFFICER

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DIRECTOR

NAME: PAUL H. BROWNSTEIN
TITLE: ASST. VP - TAX
ADDRESS: 101 COLUMBIA ROAD
AB-2
CITY/ST/ZIP/CO: MORRISTOWN, NJ 07962-

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JOHN J. TUS TREASURER 101 COLUMBIA ROAD AB-2 MORRISTOWN, NJ 07962-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JOHN M. QUITMEYER SECRETARY 1985 DOUGLAS DR. NORTH DOCK 1 GOLDEN VALLEY, MN 55422-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	DAVID A. COHEN ASST SECRETARY 101 COLUMBIA ROAD AB-2 MORRISTOWN, NJ 07962-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	WINFIELD W. MAJOR ASST SECRETARY 900 DOUGLAS PIKE SMITHFIELD, RI 02917-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	LOIS FUCHS ASST TREASURER 101 COLUMBIA ROAD AB-2 MORRISTOWN, NJ 07962-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JIM COLBY ASST TREASURER 101 COLUMBIA ROAD AB-2 MORRISTOWN, NJ 07962-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	GERARD SMITH ASST TREASURER 900 DOUGLAS PIKE SMITHFIELD, RI 02917-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.			
/s/ WINFIELD W. MAJOR SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT		WINFIELD W. MAJOR, ASST SECRETARY PRINTED NAME AND CORPORATE TITLE	
		11/30/2011 DATE	
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.			